

## Application Data Sheet

### Application Information

<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	None
<b>Computer Readable Form (CRF)?::</b>	No
<b>Title::</b>	VEHICULAR STORAGE SYSTEM
<b>Attorney Docket Number::</b>	061300-0585
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	1
<b>Total Drawing Sheets::</b>	9
<b>Small Entity?::</b>	No
<b>Petition included?::</b>	No
<b>Secrecy Order in Parent Appl.?::</b>	No

### Applicant Information

<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	US
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Chad M.
<b>Family Name::</b>	Trinkner
<b>City of Residence::</b>	Neenah

**State or Province of Residence::** WI  
**Country of Residence::** US  
**Street of mailing address::** 1100 Sandpoint Ridge  
**City of mailing address::** Neenah  
**State or Province of mailing address::** WI  
**Postal or Zip Code of mailing address::** 54956

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Michael R.  
**Family Name::** Moore  
**City of Residence::** Larsen  
**State or Province of Residence::** WI  
**Country of Residence::** US  
**Street of mailing address::** 8347 Valley View Circle  
**City of mailing address::** Larsen  
**State or Province of mailing address::** WI  
**Postal or Zip Code of mailing address::** 54947

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Robert P.  
**Family Name::** Juidici

**City of Residence::** New London  
**State or Province of Residence::** WI  
**Country of Residence::** US  
**Street of mailing address::** 417 West Millard Street  
**City of mailing address::** New London  
**State or Province of mailing address::** WI  
**Postal or Zip Code of mailing address::** 54961

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Basil A.  
**Family Name::** Briskie  
**City of Residence::** Pine River  
**State or Province of Residence::** WI  
**Country of Residence::** US  
**Street of mailing address::** N3639 County Road SS  
**City of mailing address::** Pine River  
**State or Province of mailing address::** WI  
**Postal or Zip Code of mailing address::** 54965

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Michael J.

**Family Name::** Massey  
**City of Residence::** Oshkosh  
**State or Province of Residence::** WI  
**Country of Residence::** US  
**Street of mailing address::** 1818 West Lynwood Avenue  
**City of mailing address::** Oshkosh  
**State or Province of mailing address::** WI  
**Postal or Zip Code of mailing address::** 54901

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Randall L.  
**Family Name::** Bice  
**City of Residence::** Rochester  
**State or Province of Residence::** MN  
**Country of Residence::** US  
**Street of mailing address::** 2343 Ponderosa Drive SW  
**City of mailing address::** Rochester  
**State or Province of mailing address::** MN  
**Postal or Zip Code of mailing address::** 55902

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity

**Given Name::** Brian R.  
**Family Name::** Meldahl  
**City of Residence::** Brownsdale  
**State or Province of** MN  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 62735 265th Street  
**City of mailing address::** Brownsdale  
**State or Province of mailing** MN  
**address::**  
**Postal or Zip Code of mailing** 55918  
**address::**

#### **Correspondence Information**

**Correspondence Customer Number::** 26371  
**E-Mail address::** PTOMailMilwaukee@Foley.com

#### **Representative Information**

<b>Representative Customer</b> <b>Number::</b>	26371	
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#### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent</b> <b>Application::</b>	<b>Parent Filing</b> <b>Date::</b>

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

**Assignee name::** Oshkosh Truck Corporation